



STATE OF WASHINGTON
POLICE TRAFFIC
COLLISION REPORT



1591971

REPORT NO. E267861

INTERSTATE <input type="checkbox"/>	CITY STREET <input checked="" type="checkbox"/>	FIRE RESULTED <input type="checkbox"/>
STATE ROUTE <input type="checkbox"/>	OTHER <input type="checkbox"/>	STOLEN VEHICLE <input type="checkbox"/>
COUNTY RD <input type="checkbox"/>	PRIVATE WAY <input type="checkbox"/>	HIT & RUN INVOLVED <input type="checkbox"/>

CASE #	13-02210
LOCAL AGENCY CODING	
TOTAL # OF UNITS	02
OBJECT STRUCK	

TRIAL RESERVATION						
M M D D Y Y Y Y	TIME (2400)	COUNTY #	MILES	CITY #		
DATE OF COLLISION	09 - 05 - 2013	0724	31	N S E W	IN OF	0664

ON (PRIMARY TRAFFIC WAY)	INTERSECTION <input type="checkbox"/>	NON-INTERSECTION <input checked="" type="checkbox"/>				
113TH AVE NE	BLOCK NO. <input checked="" type="checkbox"/>	2900				
MILE POST						
DISTANCE	15	00	MILES	FEET	N S E W	29TH ST NE

UNIT 01	MOTOR VEHICLE <input checked="" type="checkbox"/>	PEDAL CYCLE <input type="checkbox"/>	DAMAGE THRESHOLD MET YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>	PHONE D: 4253441757
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LAST NAME	ROSS	FIRST NAME	BRADY	MIDDLE INITIAL	A
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STREET NEW ADDRESS	3206 81ST DR NE
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CITY	MARYSVILLE	ST	WA	ZIP	982707081
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CDL	RESTRICTIONS	ENDORSEMENTS
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DRIVER'S LICENSE #	ROSS*BA047RF	STATE	WA	SEX	M	D.O.B.	MMDDYYYY	12	06	1996
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ON DUTY <input type="checkbox"/>	STATUS	AIRBAG	2	RESTR.	4	EJECT	1	HELMET USE	2	INJURY CLASS	1	NATURE OF INJURIES
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LICENSE PLATE #	009UNO	STATE	WA	VIN#	KNDJC733535040348
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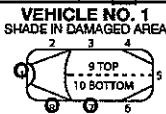
TRAILER PLATE #		STATE		TRAILER PLATE #		STATE	
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VEH. YEAR	2003	MAKE	KIA	MODEL	SORENT	STYLE	UT	VEHICLE TOWED YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>	TOWED BY	GOVT. VEHICLE YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>
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REGISTERED OWNER INFO.	
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LIABILITY INSURANCE IN EFFECT <input checked="" type="checkbox"/>	INSURANCE CO & POLICY #	LIBERTY MUTUAL INS CO A02-268-005207-40-22
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VEHICLE LEGALLY STANDING YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>	CITATION #	CHARGE
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UNIT 02	MOTOR VEHICLE <input checked="" type="checkbox"/>	PEDAL CYCLE <input type="checkbox"/>	PEDESTRIAN <input type="checkbox"/>	PROPERTY OWNER <input type="checkbox"/>	DAMAGE THRESHOLD MET YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>	PHONE D: 4254439701
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LAST NAME	HUNTER	FIRST NAME	KATHERINE	MIDDLE INITIAL	A
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STREET NEW ADDRESS	12703 12TH ST SE
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CITY	LAKE STEVENS	ST	WA	ZIP	98258
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CDL	RESTRICTIONS	ENDORSEMENTS
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DRIVER'S LICENSE #	HUNTEKA342OG	STATE	WA	SEX	F	D.O.B.	MMDDYYYY	09	07	1966
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ON DUTY <input type="checkbox"/>	STATUS	AIRBAG	2	RESTR.	4	EJECT	1	HELMET USE	2	INJURY CLASS	1	NATURE OF INJURIES
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LICENSE PLATE #	366VZT	STATE	WA	VIN#	1G2JB52T4V7563428
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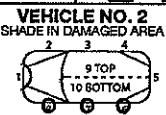
TRAILER PLATE #		STATE		TRAILER PLATE #		STATE	
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VEH. YEAR	1997	MAKE	PONT	MODEL	SNF4D	STYLE	4D	VEHICLE TOWED YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>	TOWED BY	GOVT. VEHICLE YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>
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REGISTERED OWNER INFO.	
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LIABILITY INSURANCE IN EFFECT <input checked="" type="checkbox"/>	INSURANCE CO & POLICY #	GEICO INS CO 4197-87-23-61
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VEHICLE LEGALLY STANDING YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>	CITATION #	CHARGE
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OFFICER'S NAME (PRINT)	D. CARTER	BADGE OR ID #	121	AGENCY	WA0311900
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STATE OF WASHINGTON
POLICE TRAFFIC
COLLISION REPORT



1591972

CORRECTION

REPORT NO. **E267861**

CASE # 13-02210

ADDITIONAL PERSONS INVOLVED (PASSENGERS AND/OR WITNESSES ONLY)

NAME (LAST, FIRST, MIDDLE INITIAL)		HEYMAN CORVIN J																	
ADDRESS & PHONE #		12703 12TH ST SE LAKE STEVENS WA 98258 4254439701																	
SEX		M		D.O.B.		MMDDYYYY		10		- 10 - 1997									
PASSENGER	<input checked="" type="checkbox"/>	WITNESS	<input type="checkbox"/>	UNIT #	2	SEAT POS.	3	AIRBAG	2	RESTR.	4	EJECT	1	HELMET USE	2	INJURY CLASS	1	NATURE OF INJURIES	
NAME (LAST, FIRST, MIDDLE INITIAL)		CARTER OFFICER																	
ADDRESS & PHONE #		2211 GRADE RD LAKE STEVENS WA 98258 4253349537																	
SEX		M		D.O.B.		MMDDYYYY				- - -									
PASSENGER	<input type="checkbox"/>	WITNESS	<input checked="" type="checkbox"/>	UNIT #		SEAT POS.		AIRBAG		RESTR.		EJECT		HELMET USE		INJURY CLASS		NATURE OF INJURIES	
NAME (LAST, FIRST, MIDDLE INITIAL)																			
ADDRESS & PHONE #																			
SEX				D.O.B.		MMDDYYYY				- - -									
PASSENGER	<input type="checkbox"/>	WITNESS	<input type="checkbox"/>	UNIT #		SEAT POS.		AIRBAG		RESTR.		EJECT		HELMET USE		INJURY CLASS		NATURE OF INJURIES	

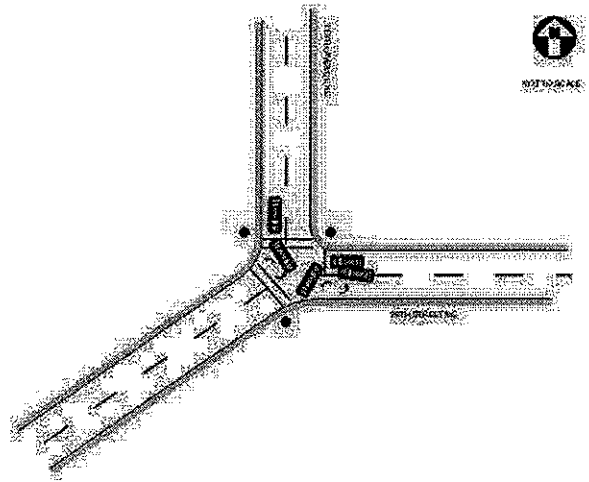
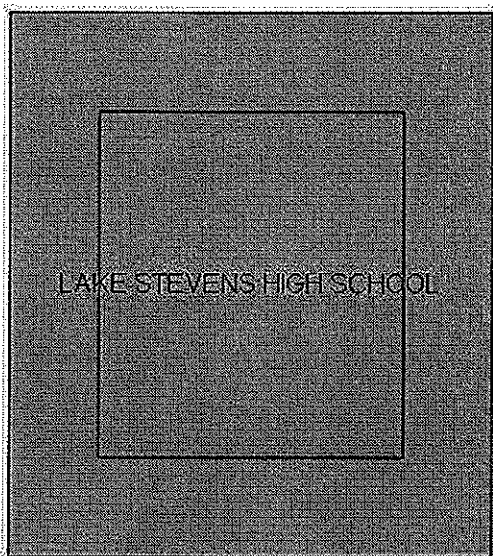
NARRATIVE

Traffic unit #2 was properly stopped at the stop line of the west bound lane of travel on 28th Street NE, at the intersection with 113th Avenue NE. Traffic unit #1 was properly stopped at the stop line of the south bound lane of travel on 113th Avenue NE, at the intersection with 28th Street NE. Traffic unit #1 proceeded to make a left turn through the intersection (east bound) and lost traction on the wet asphalt from recent rain, causing the motor vehicle to spin out of control in a counter clockwise direction. Traffic unit #1 came to a stop after colliding with traffic unit #2.

- The collision was observed by Officer Carter who was standing in the parking lot of the Lake Stevens High School.
- The collision was observed by Officer Planalp who was stopped for traffic behind traffic unit #2.
- Occupants of traffic unit #1 and #2 stated they were uninjured and wearing seat belts at the time of the collision.
- Both vehicles sustained reportable damage but were driven from the scene under vehicle power by the vehicle operators.
- Digital images were taken of the motor vehicles involved in this incident and later attached to this report.

I CERTIFY (DECLARE) UNDER PENALTY OF PERJURY UNDER THE LAWS OF THE STATE OF WASHINGTON THAT THE FOREGOING IS TRUE AND CORRECT. (RCW 9A.72.085)

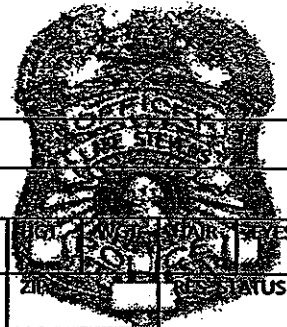
D. CARTER		09-05-13 02:54 PM	
INVESTIGATING OFFICER'S SIGNATURE	UNIT OR DIST. DET	DATED	PLACE SIGNED
APPROVED BY	DATE		
BOB SUMMERS 079	9/5/2013 4:41:12 PM		
BADGE OR ID #	ORI #	TIME POLICE DISPATCHED	TIME POLICE ARRIVED
121	WA0311900	7:24 AM	7:24 AM



LAKE STEVENS POLICE DEPARTMENT

VICTIM/WITNESS STATEMENT

CASE NUMBER 13-2210



VICTIM / WITNESS

NON-DISC <input type="checkbox"/>	NAME (LAST, FIRST, MIDDLE) <u>Ross, Brady Alexander</u>	RACE <u>white</u>	ETH	SEX <u>M</u>	DOB <u>12/6/1996</u>	AGE <u>16</u>
STREET ADDRESS <u>3208 81st Drive Marysville</u>		CITY <u>Marysville</u>		STATE <u>WA</u>		ZIP <u>98270</u>
HOME PHONE		CELL PHONE <u>425-812-4947</u>		PLACE OF EMPLOYMENT		
WORK PHONE		EMAIL ADDRESS				

I, Brady Alexander Ross, DID NOT GRANT, NOR TO MY KNOWLEDGE DID ANYONE ELSE OF PROPER AUTHORITY, GRANT ANYONE PERMISSION TO ENTER MY: (CIRCLE ONE) RESIDENCE, PROPERTY, AND/OR SUCH ASSET(S) UNDER MY CONTROL; NOR WAS PERMISSION GRANTED TO SUCH PERSON(S) TO TAKE ANY ITEMS(S) FROM, NOR COMMIT ANY ACT(S) THEREIN. I WILL PROSECUTE FOR SUCH ACTIONS COMMITTED.

I was at a stop sign. Then accelerated and my tires spun and my car went out of control ~~sliding~~ ^{sliding} into another car. I lost complete control of my car. My tires as well as the ground were wet causing hazardous conditions.

LSPD
ORIGINAL

I CERTIFY (OR DECLARE) UNDER PENALTY OF PERJURY UNDER THE LAWS OF THE STATE OF WASHINGTON THAT THE FOREGOING IS TRUE AND CORRECT

SIGNATURE: <u>Brady R</u>	DATE SIGNED	LOCATION SIGNED
OFFICER/NUMBER: <u>Darter 121</u>	DATE SIGNED <u>09 05 13</u>	LOCATION SIGNED <u>LSPD</u>

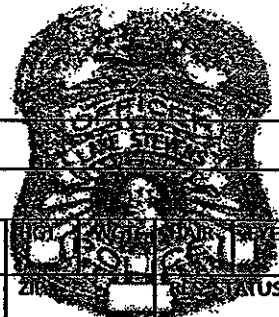
"The Lake Stevens Police Department is committed to a professional partnership with our community, by providing excellence in safety, service and education"

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LAKE STEVENS POLICE DEPARTMENT

VICTIM/WITNESS STATEMENT

CASE NUMBER 13-2210



VICTIM / WITNESS

NON-DISC <input type="checkbox"/>	NAME (LAST, FIRST MIDDLE) Hunter, Katherine Ann	RACE W	ETH	SEX F	DOB 9/7/66	AGE 46	HEIGHT 5'6"	WEIGHT 130	HAIR BLK	EYES BLU
STREET ADDRESS 12703 12th St SE #2		CITY Lake Stevens		STATE Wa		ZIP 98251		STATUS		
HOME PHONE 425-789-1746		CELL PHONE 425-443-9701		PLACE OF EMPLOYMENT						
WORK PHONE		EMAIL ADDRESS Katherine.a.hunter@outlook.com								

I, _____, DID NOT GRANT, NOR TO MY KNOWLEDGE DID ANYONE ELSE OF PROPER AUTHORITY, GRANT ANYONE PERMISSION TO ENTER MY: (CIRCLE ONE) RESIDENCE, PROPERTY, AND/OR SUCH ASSET(S) UNDER MY CONTROL; NOR WAS PERMISSION GRANTED TO SUCH PERSON(S) TO TAKE ANY ITEMS(S) FROM, NOR COMMIT ANY ACT(S) THEREIN. I WILL PROSECUTE FOR SUCH ACTIONS COMMITTED.

I was sitting at a stop sign and the car to the right/front of me was turning left, he lost control and hit my car on the side/back.

LSPD
ORIGINAL

I CERTIFY (OR DECLARE) UNDER PENALTY OF PERJURY UNDER THE LAWS OF THE STATE OF WASHINGTON THAT THE FOREGOING IS TRUE AND CORRECT

SIGNATURE: Katherine Hunter	DATE SIGNED 9/5/13	LOCATION SIGNED Lake Stevens
OFFICER/NUMBER: D Carter 181	DATE SIGNED 09 05 13	LOCATION SIGNED LSBQ

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Incident History for: #SS13019832

Case Numbers: \$SS13002210

Entered 09/05/13 07:24:25 BY SPDP17 SP0120
Dispatched 09/05/13 07:24:25 BY SPDP17 SP0120
Enroute 09/05/13 07:24:25
Onscene 09/05/13 07:24:25
Closed 09/05/13 07:55:45

Initial Type: ACC Initial Alarm Level: Final Alarm Level:
Final Type: ACC (ACCIDENT, NON-INJURY OR UNKNOWN) Pri: 2 Dispo: H
Police BLK: SS001H Fire BLK: AG1719 Map Page: 377H-5 Group: SS1 Beat: Sr

c:
Loc: 2908 113 AV NE , LKS -- LKS HS , LKS btwn 28 ST NE & 30 ST NE (V)

Loc Info:

Name:	Addr:	Phone:
/0724 (SP0120) \$OUTSRV	, NON INJ	
/0724 DISPOS SS1933	#SS102 PLANALP, OFFICER (DANIEL)	
	, NON INJ	
/0724 CHANGE	LOC: LKS HS --> 2908 113 AV NE , LKS,	
	BLK: --> SS001H	
/0730 ASSTOS SS1922	[2908 113 AV NE , LKS]	
	#SS121 CARTER, OFFICER (DAVID)	
/0730 CLEAR SS1933	, D	
/0741 ASNCAS SS1922	\$SS13002210	
/0747 (SS121) REMINQ SS1922	MDTWANT, HUNTER, KATHERINE, A, 090766, F., WA, , , , , , , , , , ,	
	''''''	
/0747 REMINQ SS1922	MDTVEH, 366VZT, , WA, , , , , , , , , , ,	
/0747 REMINQ SS1922	MDTWANT, ROSS, BRADY, A, 120696, M, , WA, , , , , , , , , , ,	
/0748 REMINQ SS1922	MDTVEH, 009UNO, , WA, , , , , , , , , , ,	
/0755 (SP0345) CLEAR SS1922	D/H	
/0755 CLOSE SS1922		

LSPD
ORIGINAL